

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> <small>Substitute for Form PTO-875</small>						<small>Application or Document Number</small> <span style="font-size: 1.5em; font-family: cursive;">01462493</span>	
<b>CLAIMS AS FILED - PART I</b> <small>(Column 1) (Column 2)</small>							
FOR	NUMBER FILED	NUMBER EXTRA		SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
BASIC FEE (37 CFR 1.16(a))				RATE		RATE	
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	•		FEE		FEE	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	•		X \$ _____		X \$ _____	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ \$ _____		+ \$ _____	
* If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL		TOTAL	
<b>CLAIMS AS AMENDED - PART II</b> <small>(Column 1) (Column 2) (Column 3)</small>							
AMENDMENT #	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
1	18	20	0	RATE		RATE	
Total (37 CFR 1.16(c))	Minus	20	0	ADDITIONAL FEE		ADDITIONAL FEE	
Independent (37 CFR 1.16(b))	Minus	20	0	X \$ _____		X \$ _____	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____		+ \$ _____	
				TOTAL ADD'L FEE		TOTAL ADD'L FEE	
2	12	20	2	RATE		RATE	
Total (37 CFR 1.16(c))	Minus	20	2	ADDITIONAL FEE		ADDITIONAL FEE	
Independent (37 CFR 1.16(b))	Minus	20	2	X \$ _____		X \$ _____	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____		+ \$ _____	
				TOTAL ADD'L FEE		TOTAL ADD'L FEE	
3				RATE		RATE	
Total (37 CFR 1.16(c))	Minus			ADDITIONAL FEE		ADDITIONAL FEE	
Independent (37 CFR 1.16(b))	Minus			X \$ _____		X \$ _____	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____		+ \$ _____	
				TOTAL ADD'L FEE		TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  
 This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-0189 and select option 2.